



Application for a Water Right Permit

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Follow the attached instructions. Attach additional sheets as necessary.

- ☒ GROUND WATER ☐ SURFACE WATER
☒ PERMANENT ☐ SHORT TERM ☐ TEMPORARY
☐ DROUGHT

*A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

- ☐ I have participated in a pre-application conference with Ecology.

| | | |
|---------------------------------------------------------------|----------------------------------|----------------------|
| Applicant/Business Name: <u>Charles Williams</u> | Phone No: <u>702-285-8321</u> | Other No: |
| Address: <u>P.O. Box 335922</u> | | |
| City: <u>North Las Vegas</u> | State: <u>NV</u> | Zip: <u>89033</u> |
| Email Address (if available): <u>WilliamsNLV@yahoo.com</u> | | |

| | | |
|-----------------------------------------|-----------|-----------|
| Contact Name (if different from above): | Phone No: | Other No: |
| Relationship to Applicant: | | |
| Address: | | |
| City: | State: | Zip: |
| Email Address (if available): | | |

| | | |
|----------------------------------------------------------------------------------------------|----------------------------------|----------------------|
| Legal Land Owner or Part Owner Name of the Proposed Place of Use: <u>Charles Williams</u> | Phone No: <u>702-285-8321</u> | Other No: |
| Address: <u>P.O. Box 335922</u> | | |
| City: <u>North Las Vegas</u> | State: <u>NV</u> | Zip: <u>89033</u> |
| Email Address (if available): <u>WilliamsNLV@yahoo.com</u> | | |

| | | |
|------------------------------|-------------------------------------|-------------------------------------------------------------|
| For Ecology Use | APPLICATION NO: <u>G3-30661</u> | SEPA: <u>Exempt</u> Not Exempt |
| | Fee Paid: <u>50.00</u> | Check No: <u>134</u> |
| | ECY Coding: 001-001-WR1-0285-000011 | |
| Date Returned | By | Priority Date <u>3-13-2012</u> By <u>KT</u> WRIA: <u>61</u> |
| Pre-application interviewer: | | |

Section 2. STATEMENT OF INTENT

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO
If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Briefly describe the purpose of your proposed project: water trees and ground cover,
utility water while working land, some drinking & potable water.

Anticipated length of time to complete your project: 2 yrs.

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

| Purpose(s) of Use | Rate (check one box only) | | Acre-Feet per Year (AF/YR) (If known) | Period of Use (Continuously or Seasonal) |
|------------------------------|------------------------------------------------------|--------------------------------------------------------------|------------------------------------------|---------------------------------------------|
| | <input type="checkbox"/> Cubic Feet per Second (CFS) | <input checked="" type="checkbox"/> Gallons per Minute (GPM) | | |
| <u>Trees Irrigation</u> | <u>150</u> | | <u>17</u> | <u>Seasonal</u> |
| <u>ground cover Domestic</u> | <u>50</u> | | <u>1</u> | <u>continuously</u> |
| <u>utility</u> | | | | |
| <u>potable</u> | | | | |
| TOTAL: | <u>200 gpm</u> | | <u>18</u> | |

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A.) If Surface Water Source <input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO | B.) If Ground Water Source <input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ Well diameter & depth: <u>6" up to 1700 FT</u> Number of proposed points of withdrawal: <u>3</u> Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. _____ |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

C.) Point of Diversion/Withdrawal – Legal Description

| | | | | | | |
|------------|----------|--------|-------------|----------|-------|---------------|
| Parcel No. | 1/4 | 1/4 | Section | Township | Range | County |
| 1981401 | E 1/2 | NE 1/4 | NW 1/4 | 05 | 38N | 38EWM Stevens |
| Lot(s) | Block(s) | | Subdivision | | | |

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

_____ Feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)

from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section_____.

| | | | | | | |
|------------|----------|-----|-------------|----------|-------|--------|
| Parcel No. | 1/4 | 1/4 | Section | Township | Range | County |
| | | | | | | |
| Lot(s) | Block(s) | | Subdivision | | | |

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

_____ feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)

from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section_____.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

| | | | | | | |
|--------------------------------------------------------------|-----|---------|------|-------|---------|------------|
| 3721 Hill Loop Road Kettle Falls, Wa 99191 E 2 NE 1/4 NW 1/4 | | | | | | |
| 1/4 | 1/4 | Section | Twp. | Range | County | Parcel No. |
| NE | NW | 05 | 38N | 38EWM | Stevens | 1981401 |

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): upto 6" well casing, submersible and above ground pumps
directly into 1 3/4 lines, tanks, & vehicle mounted tanks for distribution
over 20 acres.

1" lines for utility & potable use.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

| A.) Domestic Water Systems only | B.) Municipal Water Systems only (defined under RCW 90.03.015) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| Projected number of connections to be served: <u>3</u> | Present population to be served water: _____ |
| Type of connections: <u>2 Agricultural Bldgs</u> <u>2 Tool cabins, 1 home</u> (e.g., home, recreational cabin) | Estimate future population to be served: _____ (20 year projection) |
| C.) Water System Planning | |
| Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | |
| If yes, date plan was approved ____/____/____ Water System Number: _____ | |
| Name of water system: _____ | |
| Are you within the service area of an existing water system? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | |
| If yes, explain why you are unable to connect to the system: _____ | |
| _____ | |
| _____ | |
| _____ | |

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 20 (17 ACRES)

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: goats, sheep, llamas, buffalo, 2 to 12 of each.

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: beehives

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☒ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: under ground tank upto 10,000
gallon capacity.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: Take the 395 N out of Kettle Falls,
Turn right onto Northport-Flat creek Rd. Turn LEFT onto Fifteenmile creek Rd.
At the Y go LEFT onto Hill Loop Rd.
Go about 1.1 miles property is on both sides of the road.

Site Address: 3721 Hill Loop Rd, Kettle Falls, Wa 99191

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Charles Wilkins
 Print Name
 (Applicant or authorized representative)

[Signature]
 Signature

3-8-12
 Date

Same
 Print Name
 (Legal Owner or Part Owner Place of Use)

[Signature]
 Signature

[Signature]
 Date

[Signature]
 Print Name
 (Legal Owner or Part Owner Place of Use)

[Signature]
 Signature

[Signature]
 Date

Please check the region in which the project is located:

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| <p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p> | <input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490 | <input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400 |
| | <input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000 | <input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300 |

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872.
 Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

